

**Via Facsimile Transmittal (703) 746-5285**  
**Examiner Nashed**  
**February 11, 2003**

**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Paul DeAngelis	)	Group Art Unit: 1632
Serial No.: 09/842,484	)	Examiner: Nashed
Filed: 04/25/2001	)	Atty. Dkt. No.: 4605.003
For: CHONDROITIN SYNTHASE GENE AND METHODS OF MAKING AND USING SAME	)	

U.S. Patent and Trademark Office  
2011 South Clark Place  
Customer Window, Box Sequence  
Crystal Plaza Two, Lobby, Room 1B03  
Arlington, Virginia 22202

*Official Nashed*  
*enter 2/11/03*  
*Nashed*

**PRELIMINARY AMENDMENT**

Applicant herein seeks to amend the above-referenced application as shown below, prior to the first examination and action of the United States Patent and Trademark Office.

**In the Claims:**

Please cancel claims 1-36, 46-53, 56-58, 61-96 and 107-109, without prejudice. Please amend claim 42, as submitted herein below in clean, replacement form. Following the Remarks section is a redline version of the claim illustrating the amendments made thereto. In addition, please add new claims 111-130.

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F A C S I M I L E M E S S A G E

TO FACSIMILE NO.: (703) 746-5285

ATTENTION: Examiner Nashed  
USPTO  
Art Unit: 1632

FROM: Douglas J. Sorocco c/o Amber Stills

SUBJECT: U.S. Serial No. 09/842,484  
CHONDROITIN SYNTHASE GENE AND METHODS OF EXPRESSING  
AND USING SAME  
Our Ref. No. 4605.003

DATE: February 11, 2003

PAGES: 12 including this transmittal page.

Call (405) 478-5344 if you should have any questions regarding this transmittal.

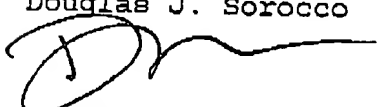
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MESSAGE:

Examiner Nashed:

Attached hereto is a Preliminary Amendment (8 pages) to be entered in the above-referenced patent application. Also attached are the Transmittal Form (1 page), Fee Transmittal Form (1 page), and Fee Determination Record (1 page), with authorization to charge deposit account no. 04-1700 in the amount of \$432.00 for additional claims.

If you have any questions or need additional information please contact me at (405) 478-5344.

Douglas J. Sorocco

  
IMPORTANT: This message is intended for the recipient indicated above. It may contain information which is confidential or protected from disclosure by the attorney-client privilege or work-product doctrine. If the reader of this message is not the intended recipient, or the employee or agent responsible for delivering the message to the intended recipient, you are advised that any dissemination, distribution or copying of the communication is strictly prohibited. If you have received this message in error, please mail to DUNLAP, CODDING & ROGERS, P.C., 9400 N. Broadway, Suite 420, Oklahoma City, OK 73114. We will reimburse you for your postage. Thank you.

**APPROVED**  
for  
**PTO DEPOSIT ACCOUNT CHARGE**  
**ACCOUNT #04-1700**

Facsimile to Exam. Nashed (703) 748-8285

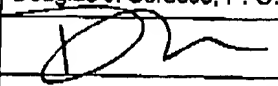
Transmittal Date: 02/11/2003

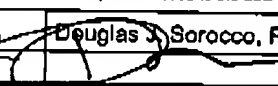
DUNLAP, CODDING &amp; ROGERS, P.C.

PTO/SB/21 (08-00)  
Approved for use through 10/31/2002. OMB 0651-0031  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	<b>Application Number</b>	<b>09/842,484</b>	
	<b>Filing Date</b>	<b>04/25/2001</b>	
	<b>First Named Inventor</b>	<b>Paul DeAngelis</b>	
	<b>Group Art Unit</b>	<b>1632</b>	
	<b>Examiner Name</b>	<b>Nashed</b>	
<b>Total Number of Pages in This Submission</b>	<b>12</b>	<b>Attorney Docket Number</b>	<b>4605.003</b>

ENCLOSURES <i>(check all that apply)</i>		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please              identify below):</i> <b>See remarks.</b>
<b>Remarks</b> 1. Fee Transmittal Form (1 page); 2. Transmittal Form (1 page); 3. Fee Transmittal Form (1 page); 4. Fee Determination Record (1 page); 5. Preliminary Amendment (6 pages).		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	DUNLAP, CODDING & ROGERS, P.C., Customer Number 30589 Douglas J. Sorocco, P. O. Box 16370, Oklahoma City, Oklahoma 73113
Signature	
Date	2.11.03

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail or U.S. Express mail no. Nashed (703) 748-8285 in an envelope addressed to the address below on this date: <span style="float: right;">02/11/2003</span>	
Typed or printed name	Douglas J. Sorocco, Reg. No. 43,145
Signature	 <span style="float: right;">Date 2.11.03</span>

SEND TO: Box Fee Amendment  
 Commissioner for Patents  
 Washington, D.C. 20231

Fax to Exam. Nashed (703)748-5285  
Transmittal Date: 02/11/2003

PTO DEPOSIT ACCOUNT CHARGE  
ACCOUNT # 04-1700

DUNLAP CODDING & ROGERS, P.C.

Approved for use through 10/31/2002. OMB 0851-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

# FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ ) 432

## Complete if Known

Application Number 09/842,484  
Filing Date 04/25/2001  
First Named Inventor Paul DeAngelis  
Examiner Name Nashed  
Art Unit 1632  
Attorney Docket No. 4605.003

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number 04-1700  
Deposit Account Name Dunlap, Coddling & Rogers, P.C.  
Customer No. 30589

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments  
☒ Charge any additional fee(s) during the pendency of this application  
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 750	2001 375	Utility filing fee	
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 180	2005 80	Provisional filing fee	
SUBTOTAL (1)			(\$ ) 0

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
130	20	9	\$180
Independent Claims 46	6	42	\$252
Multiple Dependent			\$0

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ ) 432

\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65			Surcharge - late filing fee or oath	
1052 50	2052 25			Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130			Non-English specification	
1812 2,520	1812 2,520			For filing a request for ex parte reexamination	
1804 920*	1804 920*			Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*			Requesting publication of SIR after Examiner action	
1251 110	2251 55			Extension for reply within first month	
1252 410	2252 205			Extension for reply within second month	
1253 930	2253 465			Extension for reply within third month	
1254 1,450	2254 725			Extension for reply within fourth month	
1255 1,970	2255 985			Extension for reply within fifth month	
1401 320	2401 160			Notice of Appeal	
1402 320	2402 160			Filing a brief in support of an appeal	
1403 280	2403 140			Request for oral hearing	
1451 1,510	1451 1,510			Petition to institute a public use proceeding	
1452 110	2452 55			Petition to revive - unavoidable	
1453 1,300	2453 650			Petition to revive - unintentional	
1501 1,300	2501 650			Utility issue fee (or reissue)	
1502 470	2502 235			Design issue fee	
1503 630	2503 315			Plant issue fee	
1460 130	1460 130			Petitions to the Commissioner	
1807 50	1807 50			Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180			Submission of Information Disclosure Stmt	
8021 40	8021 40			Recording each patent assignment per property (times number of properties)	
1609 750	2809 375			Filing a submission after final rejection (37 CFR 1.129(a))	
1610 750	2810 375			For each additional invention to be examined (37 CFR 1.129(b))	
1801 750	2801 375			Request for Continued Examination (RCE)	
1802 900	1802 900			Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ ) 0

## SUBMITTED BY

Name (Print/Type) Douglas J. Sorocco

Signature

Registration No. (Attorney/Agent)

43,145

(Complete if applicable)

Telephone (405) 478-5344

Date 02/11/2003

Box Fee Amendment  
Commissioner for Patents  
SEND TO: Washington, D.C. 20231

Facsimile to Exam. Nashed (703) 746-5285  
Transmittal date: 02/11/2003

Approved for use through 10/31/2002, PTO/SB/06 (08-00)  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD					Application or Docket Number		
					09/842,484	4605.003	
<b>CLAIMS AS FILED - PART I</b>							
(Column 1)		(Column 2)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA		RATE	FEE	RATE FEE	
BASIC FEE (37 CFR 1.16(a))					\$ 0	\$ 0	
TOTAL CLAIMS (37 CFR 1.16(c))		minus 20 =	*	0		0	
INDEPENDENT CLAIMS (37 CFR 1.16(b))		minus 3 =	*	0		0	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				0		0	
* If the difference in column 1 is less than zero, enter "0" in column 2				TOTAL	0	0	
<b>CLAIMS AS AMENDED - PART II</b>							
(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY OR OTHER THAN SMALL ENTITY	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	RATE ADDITIONAL FEE	
	Total (37 CFR 1.16(c))	* 130	Minus	** 110	= 20	x \$ 9 = 180	x \$ 18 = 0
	Independent (37 CFR 1.16(b))	* 46	Minus	*** 40	= 6	x 42 = 252	x 84 = 0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			+ 140 = 0	+ 280 = 0		
				TOTAL	432	TOTAL	0
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	RATE ADDITIONAL FEE	
	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$ 9 = 0	x \$ 18 = 0
	Independent (37 CFR 1.16(b))	*	Minus	***	=	x 42 = 0	x 84 = 0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			+ 140 = 0	+ 280 = 0		
				TOTAL	0	TOTAL	0
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	RATE ADDITIONAL FEE	
	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$ 9 = 0	x \$ 18 = 0
	Independent (37 CFR 1.16(b))	*	Minus	***	=	x 42 = 0	x 84 = 0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			+ 140 = 0	+ 280 = 0		
				TOTAL	0	TOTAL	0

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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Washington, DC 20231